



BOROUGH OF FAVERSHAM

# ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for

1949

COLONEL W. H. CRICHTON, C.I.E., I.M.S. (Ret.),
M.B., Ch.B. (Edin.), D.P.H. (Lond.)

MEDICAL OFFICER OF HEALTH





# BOROUGH OF FAVERSHAM

# ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

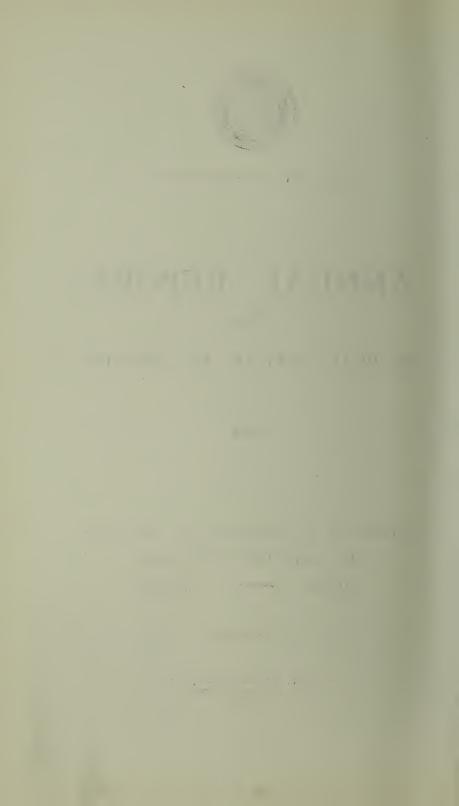
for

1949

COLONEL W. H. CRICHTON, C.I.E., I.M.S. (Ret.),
M.B., Ch.B. (Edin.), D.P.H. (Lond.)

MEDICAL OFFICER OF HEALTH

F. Austin and Sons (Printers) Ltd., 23 Court Street, Faversham, 1950



# THE TOWN COUNCIL OF THE BOROUGH OF FAVERSHAM

THE MAYOR:
\*Councillor Harry Knowles

THE DEPUTY MAYOR:
\*Councillor Jasper Beale Neame

#### ALDERMEN:

W. I. Gould

\*J. H. Johnson

\*Phil Johnson, O.B.E.

\*J. W. Videan

#### COUNCILLORS:

E. A. W. Black

\*E. J. Mumford Cooke

\*C. E. Ely

\*P. D. Gausden

\*A. W. Hulkes

\*F. G. Johnson F. Pearson

\*The Rev. M. E. Lynch G. P. Rudgard

T. Williams

(\*Denotes members of Health Committee)

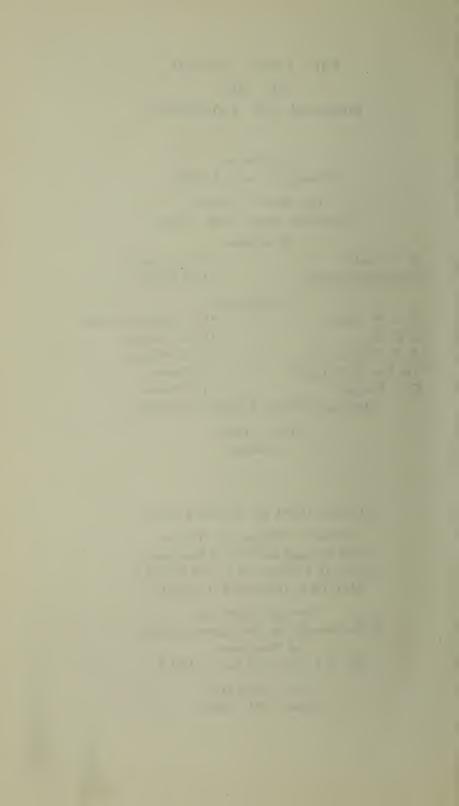
TOWN CLERK:

# PUBLIC HEALTH DEPARTMENT

Medical Officer of Health to the Borough and Port of Faversham Col. W. H. Crichton, C.I.E., I.M.S., (Ret.) M.B., Ch.B., (Edin.) D.P.H., (Lond.)

Sanitary Inspector to the Borough and Port (Eastern Section) of Faversham Mr. A. J. Hurn, C.R.San.I., M.S.I.A.

CLERK (PART-TIME)
Miss V. M. Wallis



# **BOROUGH OF FAVERSHAM**

Municipal Offices, Faversham. July, 1950.

# To the Mayor, Aldermen and Councillors

Dear Mr. Mayor,

I have the honour to present my third Annual Report on the state of the Public Health of the Borough.

On the whole, the health of the Borough may be described as satisfactory although the Birth Rate has fallen steeply (p.6 §1(iv)) and the Death Rate has risen slightly (p.6 §2(b)). The Infant Mortality Rate, widely recognised as an index of environmental hygiene, has declined to the very satisfactory figure of 18.3 per thousand births (Section II (d)). Considering the very crowded conditions and the insanitary circumstances in which a large section of the population live, this is indeed gratifying, if not surprising.

The incidence of notifiable infectious disease (Section III) has happily been remarkably low. There is no measure of other diseases or of standard of fitness other than that provided by the routine inspection of school children (Section IV, para 3) which regrettably displays a trend from the better group to the lower groups.

The most pressing public health problem of the Borough remains that of housing, as indeed it is of the whole country. Although all that may be done is being done, the fact remains that the supply is not meeting the demand, and, worse still, that it is impossible at the present rate to visualise any appreciable improvement in the forseeable future (Section VI). In these circumstances, the fact that the points scheme for the selection of tenants has not been brought into operation is disastrous, and the situation is causing grave discontent among the people (Section VI, paras. 4, 5 and 6).

I am greatly indebted to the lone Sanitary Inspector for his industry and loyal co-operation throughout the year, and for his assistance in the preparation of this Report in which his own has been incorporated. I am also grateful to the Officers of the Borough for their unfailing assistance and to my Clerk (Miss Wallis) for her efficient and constant attention to her duties in my office.

I venture to hope that I shall enjoy in future an even greater measure of encouragement and understanding from the Borough Council than has hitherto been shown to me in my endeavours.

I am, Sir,

Your Obedient Servant, W. H. CRICHTON,

#### SECTION I.

#### STATISTICS AND SOCIAL CONDITIONS OF THE AREA

#### 1. Climate

The year 1949 was notable for an exceptionally hot and very dry summer, during three months of which, there was an average of less than one inch of rainfall per month, followed in October and November by very heavy rainfall (6.32in. and 3.40in. respectively). The winter months, both at the beginning and at the end of the year, were mild and there was little snowfall.

The monthly averages of Temperature and Rainfall are shown in Appendix A.

#### 2. Area

3,070 approximately. No change.

## 3. Population

The estimated mid-year population of the Borough for 1949 was 12,340 according to the Registrar General's calculations, an increase of 190 on the figure for the preceding year.

#### 4. Number of Inhabited Houses

The number of inhabited houses at the end of 1949 was 4,049, as compared with 3,968, an increase of 81. Of these 67 were Council-Houses and 14 were privately constructed.

#### 5. Rateable Value

£74,518 as compared with £71,490 in the preceding year.

# 6. Sum Represented by the Penny Rate

£292 18s. 3d., an increase of £11 11s. 3d. on the figure for 1948.

#### SECTION II

#### VITAL STATISTICS

#### 1. Births

(a) The total number of births ascribed to inhabitants of the District was 218 as compared with 225 in the preceding year. The details are as follows:—

		Males	Females	Total
(i)	Live Births—Legitimate	102 (112)	107 (97)	209 (209)
	Illegitimate	5 (9)	4 (7)	9 (16)
		107 (121)	111 (104)	218 (225)

- (ii) Still Births—There were only four still births during the year, all legitimate children, one male, three female. Three occurred in 1948. The percentage of still births to live births is 1.8 against 1.3 in 1948.
- (iii) Illegitimate Rate—The percentage of illegitimate births has fallen to 4.1 from 7.6 in the preceding year.
- (iv) The Birth Rate—The birth rate per 1,000 of the estimated population has fallen further to another record figure for birth rates since the war i.e. 17.6. This is still higher than the pre-war figure for the District which is shown as 13.8 per 1,000 in 1938, but there has been a rapid decline from the unusually high rates prevailing immediately after the war, thus:—1946, 32.4 per mille; 1947, 20.8 per mille; 1948, 18.5 per mille.

The birth rate for England and Wales for the year 1949 is 16.7 per thousand, while that for a sample of smaller towns with a population of 25,000 is 18.0 per thousand. Comparable County records are not yet available.

#### 2. Deaths

- (a) The total number of deaths from all causes occurring among inhabitants of the District was **184** as recorded by the Registrar General, 18 more than in the preceding year.
- (b) The Death Rate per 1,000 of the estimated population is **14.9** as compared with 13.6 in the preceding year. The Death Rate for England and Wales is 11.7 and that for smaller towns 11.6. The Borough rate is therefore a little higher than the prevailing average rate.

# (c) Causes of Death

(i) The following table compiled from the Registrar General's figures shows the causes of deaths recorded.

TABLE I

Diseases and Other Causes	М	F
Tuberculosis of Respiratory System Other forms of Tuberculosis Influenza Cancer of Buccal Cavity and Oesophagus (M) Uterus (F) Cancer Stomach and Duodenum Cancer Breast Cancer All other sites Intracranial Vascular Lesions Heart Disease Other Diseases of the Circulatory System Bronchitis Pneumonia Other Respiratory Diseases Ulcer of Stomach or Duodenum Other Digestive Diseases Nephritis Premature Birth Congenital Malformations, Birth Injury, Infant Disease Road Traffic Accidents Other Violent Causes	4 2 3 2 10 14 28 1 8 3 2 3 3 1 1 1	1 1 4 -2 3 10 18 29 -7 2 -2 1 3 -1 1
All other Causes	91	93

(ii) The only features of note are the appreciable increase in the number of deaths from cancer, 30 as against 13 in the preceding year, and the welcome fall in the number of deaths in infants under 1 year of age. In the report for 1948 a drop of 60 per cent. in the number of deaths from cancer and an increase of 28 per cent. in infant death was recorded.

# (d) Infant Mortality

- (i) With only four recorded deaths among infants under one year of age, the infant mortality rate for the year has declined to **18.3** per thousand live births as compared with 35.5 in 1948 and 27.1 in 1947.
- (ii) Whether this remarkable improvement can be ascribed to exceptionally favourable weather conditions or not it is impossible to state. The figure for England and Wales is 32 per 1,000 and that for small towns 30 per thousand.
- (iii) The recorded causes for the four infant deaths were one pneumonia, one premature birth and two congenital malformations. It is a matter for gratification that none occurred from gastric infections.

#### SECTION III

# INFECTIOUS AND OTHER DISEASES— THEIR PREVALENCE AND CONTROL

#### 1. Notifiable Diseases

(a) The number and character of infectious diseases notified during the year is shown in the following table:—

#### TABLE II

Disease	No. of Cases	Admission to Hospital or Sanatorium	Deaths
Food Infections	<b>—</b> (*45)	_	_
Polio-Encephalitis	1 (—)	1	
Scarlet Fever	14 (6)	12	
Whooping Cough	8 (46)	_	_
Measles	13 (206)	_	1
Ac. Pneumonia	10 (5)	1	10
Erysipelas	1 (3)	_	_
Puerperal Pyrexia	(2)	_	_
Cerebro-Spinal Fever	<b>—</b> (1)	_	_
Tuberculosis			_
Pulmonary	8 (23)	4	9
Non-Pulmonary	8 (8)	3	
11 1 1 1 1 1			_
Totals	63 (345)	21	19
3		<u> </u>	_

\*Figures in brackets relate to the preceding year.

(b) It will be noted that there has been a very appreciable decrease in the incidence of infectious disease in the District as compared with the preceding year. This is largely accounted for by the fall in the incidence of measles, displaying as usual the biennial periodicity of this disease. No cases of food infection were notified during the year.

(c) There has also been a welcome decrease in the number of cases of whooping cough. As Whooping Cough is now almost certainly the most serious disease of early childhood, the very low incidence is particularly gratifying. How far this improvement is due to the growing

demand for immunisation, it is as yet impossible to assess.

(d) The solitary case of polio-encephalitis was of very mild

character. Recovery was rapid and complete.

(e) The high case mortality (100%) among the cases of pneumonia is due to two causes—firstly the fact that with two exceptions, one an infant of 3 months and another a man of 48, they occurred in the higher age groups; and secondly, because medical practitioners are inclined to forget to notify cases of pneumonia with the result that only fatal cases come to the knowledge of this office. At least one fatal case of pneumonia presented a violent and rapid course with indefinite or a typical symptoms. It is thought possible that this may have been a case of "Q" Fever, a few cases of which have been diagnosed in the vicinity, but unfortunately this suspicion could not be confirmed.

(f) The small number of cases of Scarlet Fever were characterised by very mild symptoms, so much so that difficulty was experienced in

arriving at a diagnosis.

(g) It will be noted that no cases of Diphtheria occurred again this year. By courtesy of the County Medical Officer I am in a position to report that at the end of the year, 2,264 out of 2,834 children or 79.8% under 15 years of age were protected against Diphtheria by Immunisation. This is a good standard of immunisation.

(h) (i) The number of new cases of Pulmonary Tuberculosis shows a remarkable improvement on that of the preceding year, a surprising feature in view of the housing difficulties and the serious shortage of sanatorium accommodation. Nevertheless the balance of cases of Tuberculosis on the Register at the end of the year is still rising slowly, thus 59 in 1946, 67 in 1947, 78 in 1948 and 82 in 1949.

(ii) The particulars of the cases of Tuberculosis for the year

under review are set out in the following table:—

TABLE III

	Pulm	onary	Non-Pu	Totals	
	M	F	M	F	
On Tuberculosis Register 1.1.49 Transferred to Borough Notified in Borough	32 (25) 2 (3) 5 (11) — 39 (39)	24 (19) 1 (—) 3 (12) — 28 (31)	11 (9) - (1) 4 (3) - 15 (13)	11 (9) - () 4 (5) - 15 (14)	78 (62) 3 (4) 16 (31) — 97 (97)
Non-Tuberculosis	- (-) 5 (5) 1 (2) 3 () - 9 (7)	- (1) 4 (3) - (2) 1 (1) - 5 (7)	- (-) - (1) - (1) - (2)	- (-) - (-) 1 (3) - (-) 1 (3)	— (1) 9 (8) 2 (8) 4 (2) — 15 (19)
Balance remaining on Register 31,12,49	30	23	15	14	82

# 2. Ages Affected

The incidence of the diseases notified during the year by age group is shown in the following statement:—

	-1	<b>—</b> 5	15	<b>—20</b>	<del>-30</del>	40	50	60	over 60
Measles	1	-8	4		_			_	
Whooping Cough	1	5	2		_	_			_
Pneumonia	_	_		_	2	_	3	2	3
Erysipelas	_	_			_	_	- 1	1	_
Scarlet Fever	_	4	9	_	1	_	_	<u> </u>	
Acute Polio-									
Encephalitis			1		_	-		_	
Tuberculosis									
Pulmonary	- 1	-		2	1		4	1	_
Non-Pulmonary		1	2	2	1	1	1		

3. Vaccination against Small Pox

According to figures kindly provided by the County Medical Officer, 83 persons were protected against small pox by vaccination and 20 were re-vaccinated during the year. 79 of the 83 vaccinated were under five years of age. Those re-vaccinated were over 5 years of age. As the number of births in the preceding year was 225 it does not appear that advantage of this means of protection is being taken. The recent experiences in Glasgow should provide a very salutary lesson and an inducement for people to safeguard themselves and their families.

4. Venereal Disease

The only indication of the degree of prevalence of Venereal Disease is the figures supplied by courtesy of the County Venereologist of patients from the Faversham and East Swale attending the V.D. Clinic at Canterbury. These are as follows:—

	0	Total				
Syphilis		Gonor	rhoea	Non Ve		Attendances
M	F	M	F	M	F	
2		1	1	8	7	126

#### SECTION IV

#### GENERAL PROVISION OF HEALTH SERVICES

#### 1. Public Health Staff

- (a) The only change which has taken place during the year has been in the nature and extent of the duties of the Medical Officer of Health who has been relieved of his part-time Welfare duties with the County Council to assume administrative charge as Medical Officer of Health to the three Districts on the Isle of Sheppey in addition to his three Districts on the mainland. The appointment is subject to review at the end of twelve months to enable the authorities concerned to judge of the practicability of the scheme in the light of experience.
- (b) There has been no addition to the Staff of the Health Department although the need for an Additional Sanitary Inspector has been very strongly urged to act as part-time Housing Officer and to carry out a comprehensive housing survey (q.v. Section VI paras. 2, 4 and 5). In addition the Borough has to depend on the services of a solitary Sanitary Inspector whose time is very much taken up with Slaughter House duties and for whom there is no substitute in the event of absence on leave or sickness.

#### 2. Health Services

- (a) The Health services provided by the Borough Council are now restricted to public health in the environmental sphere i.e. health education, housing, food and food inspection, the prevention and control of disease (including infectious disease) rodent control, factory inspection, vital statistics and Port Health. Personal health services, i.e. Maternity and Child Welfare, Home Help and Health Visitor Services, Tuberculosis and Venereal Disease Services and School Health Service are all administered by the County Council as Local Health Authority under the National Health Service. It is regrettable, in my view, that closer liaison in every day work is not maintained between environmental and personal health services as the two are too closely related to be separated. I cannot help feeling that it was never intended that there should be so complete a divorce between the two.
- (b) The Health Services provided by the Council are referred to in their appropriate Sections.

#### 3. School Health Services

(i) By courtesy of the County Medical Officer a copy of the County School Health Service Annual Returns for the Borough have been made available to me and from these the following interesting figures have been extracted:—

a. Number of periodical examinations 796 (1,015)

b. Number of pupils found requiring treatment 61 (158)

c. Percentage ... ... 7.7% (15.5%)

#### d. Commonest defects-

Eyes	 39.3%	(30%)
Ear, Nose and Throat		(12.4%)
Orthopoedic	 6%	(15.4%)

(ii) It will be noted that although the total number of inspections carried out during the year was considerably less than the number in the preceding year, 796 as against 1,015, the proportion of defects of eyes and ear, nose and throat have risen, while the orthopoedic cases have declined.

(iii) The general condition of the pupils inspected is classified in percentages as follows:—

Age Groups	A	B	C
	Good	Fair	Poor
Entrants Second age Group Third age Group Other Periodic	9.8 (37.3)	64 (48.1)	26.2 (14.6)
	23.4 (49)	71.6 (50)	5.0 (1.0)
	31.6 (44.4)	62.8 (49.7)	5.6 (5.9)
Inspections	16.3 (34.3)	72.5 (57.7)	11.2 (8.0)
	20.7 (40.9)	67.9 (51.9)	11.4 (7.2)

These figures suggest a definite trend from the better standard to the poorer standards as compared with the preceding year. One can only hope that this is only a temporary phase as the figures in the 1948 were more encouraging, there being a rise in the "A" Group and a fall in the "C" Group.

(iv) Of the minor ailments treated among school children the

highest percentage (25.8) is that of skin diseases.

#### 4. The National Assistance Act

No means appear to have been found to overcome the legal difficulties presented in the operation of this Act, and, as it stands, it is useless when cases of recalcitrant aged persons needing care and attention have to be dealt with.

#### SECTION V

#### SANITARY CIRCUMSTANCES OF THE AREA

#### 1. (a) Water Supply

Six samples from the public supply were taken during the year and submitted to the County Pathologist for bacterological examination. The reports on each of the samples were that the water was good. No samples of chemical analysis were taken. An extension of the main from Love Lane to Tin Bridge was made. The six existing Boughton Field Cottages and the six cottages now in course of construction together with four Tin Bridge Cottages, to which water was being carted, are now able to obtain a sufficient and safe supply.

No. of Houses supplied directly by a piped supply	3638
No. of Houses supplied by standpipes in backyards No. of Houses supplied by taps in joint washhouses	274 20
No. of Houses supplied by wells	23

Total ... 3955

#### (b) Drainage and Sewerage

No extension to the existing sewers were made during the year. Details of drainage work attended to will be found in Appendix II.

#### (c) School Sanitation

The Sanitary accommodation at the Schools in the Borough is generally kept in a satisfactory condition and no action had to be taken during the year in this matter.

# (d) Public Conveniences

The care and maintenance of the public conveniences are under the jurisdicition of the Borough Engineer and Surveyor.

# (e) Places of Entertainment

Inspections were made during the year of the Sanitary accommodation at the "Invicta" and "Odeon" Cinemas and the "Faversham Institute." Informal action was taken in respect of the condition of accommodation at the "Invicta." Cinema and subsequent inspections have shown that considerable improvement has been effected. Improvement of accommodation at the "Institute" is very necessary particularly as regards the women's conveniences which are not considered to be sufficient.

# 2. Inspection and Supervision of Food

# (a) Milk Supply

On 1st October, 1949, the Food and Drugs (Milk and Daries) Act 1944 came into operation. This legislation had the effect among other things of transferring the duty of supervision of farms where milk is produced to the Ministry of Agriculture and the supervision of premises

where Pasteurisation and Sterilization is carried on to the Food and Drugs Authority, i.e. the County Council. Prior to the operation of this Act cleven samples of Tuberculin Tested and four of Pasteurised Milk were taken and submitted to the County Laboratory for bacteriological examination. All were satisfactory.

# (b) Meat Inspections and Slaughterhouse

Routine inspections are made at the Government Slaughterhouse and all animals sent for slaughter are inspected anti and post mortem. The accommodation provided at the Slaughterhouse is extremely cramped and inadequate for the purpose. Representations to this effect have been made to the Ministry and improvements have been promised.

The following table gives the number of animals slaughtered during the year and the condemnations of carcases and organs affected by

diseased conditions:

1949 CARCASES INSPECTED AND CONDEMNATIONS									
	Cattle Excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Total			
Number killed	640	232	250	2437	195	3,754			
Number Inspected	640	232	.250	2437	195	3,754			
T.B. Whole carcases condemned	1	1		15		17			
some part or organ condemned Percentage of No. inspected affected with disease other than Tuberculosis	128	83	.4%	86	19 9.7%	317			
Tuberculosis Only Whole Carcases condemned Carcases of which	2	4			1	7			
some part or organ condemned Percentage of No. inspected affected	27	22	1	_	5	55			
with Tuberculosis	4.5%	11.2%	.4%	- 4	3%				

Of the total number of 3,754 animals slaughtered 396 or 10.5% were found to be affected with diseased conditions or parasitic infections. 62 or 1.6% were found to be affected with Tuberculosis.

452 Inspections were made at the Slaughterhouse during the year and 5 tons 12 cwts. 1 lb. of meat condemned as unfit for human consumption.

#### (c) Other Foods

Other items of foodstuffs condemned included various groceries, vegetables, fish, etc. amounting to 8 tons 17 cwts. 3 lbs.

The total weight of all food condemned during the year was 14 tons 10 cwts. 4 lbs.

#### (d) Fish-Frying Establishments

There are seven fish frying establishments in the Borough, and routine inspections were made during the year. The premises generally are kept in a satisfactory condition and no complaints were received regarding them during the year.

#### (e) Food Factories

There are two food factories, i.e. British Fruits Ltd., Lady Dane, where fruit and vegetables are processed, and Supa Crisps Ltd., North Lane, where potato crisps are prepared.

This latter is a new enterprise in the Borough and is carried on in

a satisfactory manner.

# (f) Ice Cream

There were 25 premises registered for the sale of Ice-Cream at the end of the year. No ice-cream is manufactured in the Borough and all registered premises sell the commodity as received from the manufacturers from refrigerated cabinets.

#### 3. Food and Drugs Act 1948

By courtesy of the Chief Inspector Food and Drugs Act, the following details of samples taken in the District by the County Sampling Officer are included:—

Article	•				No. of	Samples
Apricot Jam						1
Baby Cream						1
Beef Paste			• • •			1
Beef Sausage Mea		• • •		• • •		1
Bicarbonate of So	oda	• • •		• • •		1
Butter		• • •	• • •	• • •	• • •	1
Cherry Cake	• • •	•••	• • •	• • •	• • •	1
Cherry Jam	• • •	• • •	• • •	• • •	• • •	1
Cooking Fat		• • •	• • •	• • •	• • •	1
Cough Syrup	• • •	• • •	• • •	• • •	• • •	1
Curry Powder	• • •	• • •	• • •	•••	•••	1
Dried Mixed Her		• • •	•••	• • •	•••	1
Extracts of Choch	ineal	• • •	• • •	•••	• • •	1
Fruit Cake	• • •	• • •	•••	•••	•••	11
Gin	• • •	• • •	•••	• • •	• • •	1
Greengage Jam		• • •	• • •	• • •	• • •	I
Household Embro	cation		•••	•••	• • •	1
Mango Chutney		• • •	• • •	• • •	• • •	1
Marmalade		• • •	• • •	•••	• • • •	1
Mild Mustard Sa	uce	• • •	•••		• • •	63
Milk Pate D'Anchois a	lo Fron	····	• • •	• • •	• • •	1
	ia Fiai	icaise	•••	•••	• • •	1
Rose Hip Syrup		• • •	• • •	• • •	• • •	1

Scotch Ginger		(1)			 1
Sweet Pickles					 1
Syrup of Figs					 1
Thick Sauce					 1
Vinegar					 1
Whisky					 2
Zinc Boric and	Castor	Oil Oir	ntment		 1
					_
				Total	 93

All the above samples were genuine with the exception of the following —

Milk—36.7% deficient in fat. Adulterated.

"Appeal to Cow" samples showed that the cows were giving poor quality milk. No further action was, therefore taken.

Milk—Contained 7.7% added water. Adulterated.

Follow up samples were all low in solids not fat, but as these deficiencies were due to natural causes, no further action was taken.

Milk—6.7% deficient in fat. Inferior.

Samples taken from other churns in the same consignment were all genuine. No further action was taken.

Milk—13.3% deficient in fat. Adulterated.

Milk—16.7% deficient in fat. Adulterated.

Milk—16.7% deficient in fat. Adulterated.

Three other churns in the same delivery contained milk which was above the required standard in fat. The deficiencies were due to improper mixing. Further samples were taken and proved to be satisfactory.

Milk—6.7% deficient in fat. Inferior.

This was a follow-up sample taken as a result of previous inferior samples. The cows were giving milk of poor quality.

Rose Hip Syrup—Ascorbic Acid 130 mg/100ml. 37% deficient. Inferior. This sample was taken from old stock and a doubt existed as to the effect of storage conditions. A further sample will be taken.

Pate D'Anchois a la Française—Contains 14% starchy filler not declared. Inferior.

Imported produce. No further action taken.

#### SECTION VI

#### HOUSING

#### 1. Housing Progress

Housing still presents the most urgent and the most unsatisfactory public health problem in the Borough, as indeed it is all over the Country. During the year under review 67 new houses were completed and allocated as against 53 in the preceding year, leaving a large unsatisfied demand, estimated by a recent revision of application forms, at 375 "live" applicants, as against 573 at the end of 1948. There is reason to believe that a proportion of applicants despairing of their chances of ever getting the accommodation they seek have given up the struggle or have not bothered to submit the new forms demanded.

# 2. Housing Survey

The exact needs of the Borough in housing are not known. During 1948 a recommendation was made to the Council that the unsatisfactory housing situation would necessitate a Survey and that additional staff would be required for this purpose. The Mayor (Ald. J. B. Neame) in his Annual Review of 1948 acknowledged the need of this survey of insanitary and unfit houses and stated that there was no doubt "that the Health Department staff will have to be strengthened." Unfortunately it would now appear that different counsels prevail.

#### 3. Housing Programme

I understand that the housing programme for the ensuing year has been limited to a maximum of 60 houses, of which, it is gratifying to note, 18 are to be two bedroomed houses which will give old people and young couples, married or about to be married, a better opportunity of making a home than they have hitherto had. Nevertheless, the total number of new houses contemplated is pitiably inadequate compared with the urgent demand which exists. I am not competent to express an opinion on the extent or the manner by which the programme could be extended or expedited. I am aware of the serious limitations which are imposed on On the other hand one reads references to high speed housing in England (e.g. Cranford Park Estate, Hayes) and abroad in Germany and in Austria, by new methods of construction and design and it is difficult to resist the feeling that what can be done elsewhere could, and indeed should, be done here. Surely the distressing needs of many families demands that something more should be done to ensure that an adequate number of houses is provided now.

## 4. The Selection of Tenants

The slow progress of the housing programme makes it all the more important that the selection of tenants should be made with scrupulous attention to their needs. The acute distress in Faversham is heightened by reason of the fact that the Council have no satisfactory system in operation whereby the relative needs and circumstances of each individual

applicant can be assessed by a trained Official for the guidance of the Selection Committee. The short lists considered by the Committee are compiled from the personal knowledge of applicants by individual Members, or from the degree of importunity exercised by individual applicants in seeking interviews with Members of the Committee, the meek and the mild going to the wall. Accordingly, a "points" system based on the recommendation of the Housing Advisory Committee of the Ministry of Health was recommended to the Council and was finally adopted. But the scheme necessarily demanded the employment of an official, an additional Sanitary Inspector, to act part-time as Housing Officer. This was accordingly recommended (q.v. Section III), but, as the Council have seen fit to reject this recommendation, the points scheme has been stillborn.

The seriousness of this decision of the Council lies in the fact that. in these circumstances, not only is it impossible for every applicant to be sure of having his claim fairly considered on its merits by a trained Official, if indeed it is considered at all, but that no responsible Officer is available to interview applicants when they submit their applications, or when they seek redreess for their grievances. The importance of this aspect of Housing Administration does not appear to have been fully appreciated by the Council. In these circumstances it has become the practice, "faut de mieux," for applicants to be referred to the Health Department, but as the Council have no clearly defined policy of their method of procedure in selecting tenants, it is impossible to give these unhappy visitors anything more than sympathy in their plight, and the vague hope that sometime, somehow, their case will be considered by the Council. It is not surprising therefore that there is grave discontent among the people of Faversham, not only because there are not enough houses being built, but because they feel far from confident that tenants are being selected fairly. according to their needs.

# 5. Exchanges and Transfers

There is often scope for exchanges and transfers to be arranged between different families to their mutual advantage, as for instance where one family has out-grown its accommodation whereas another has accommodation to spare by reason of the dispersal of a grown up family. There is also the problem of the family whose background and habits justify the fear that they will not be suitable for new Council houses. A Housing Officer familiar with the circumstances of these families could do much to effect such exchanges by judicious and tactful approaches to the families concerned and to owners of property, and by the education of the "problem" type family in a better manner of living. At present nothing is being done on these lines because of lack of staff. This is particularly regrettable in Faversham where no intermediate accommodation of the nature of hutted camps exists which serve the purpose of transition by qualification from a slum dwelling to a Council House.

#### 6. Individual Unfit Houses

The difficulty of ensuring that the tenants of houses unfit for human habitation can be found alternative accommodation, although this is not a statutory obligation on the part of the Council, has rendered any action to impose Demolition Orders under Section 11 of the Housing Act practically useless. Nor have tenants of houses which have been made the subject of a Demolition Order been allocated any special priority on this account (e.g. Black Cottages, Lower Brents). The same obstacles have been encountered in making an official representation for a Small Clearance Area under Section 154(2) of the Housing Act (e.g. North Lane). During the year 21 houses were represented as unfit for human habitation. Of these two have been demolished in North Lane, two in Abbey Street, while the rest are partially occupied (Black Cottages) or are standing empty.

# 7. Sanitary Defects

Because of the degree of dilapidation and disrepair of much of the property in Faversham, sanitary defects are numerous and requests to the Health Department for assistance to effect essential repairs are frequent. Compliance with informal notices is difficult and slow in the majority of The restrictions imposed by Statute on the rentals of houses, and the rising cost of labour and materials, make the ownership of property a liability and in many cases it is impossible not to sympathise with the owners. On the other hand, the claim of the tenants to a minimum standard of comfort cannot be denied, and essential repairs are very properly insisted on, even though these entail more time, correspondence and persuasion than is ordinarily necessary. On the other hand the acquisition by speculators of slum property in its present state and in the circumstances existing today, makes one wonder whether, at least in some cases, one's sympathy with the owners is not misplaced. 55 Informal Notices for the improvement of housing defects were issued during the year but 92 further defects were dealt with. No statutory notices were served. A detail of Nuisances and Housing Defects dealt with is shown in Appendix B.

# 8. Improvements

The Housing Act 1949 includes facilities for the improvement of existing houses by which it was hoped that much could be done to attain a better standard of accommodation. It is hoped that advantage will be fully taken of the provisions of this Act.

#### 9. Conclusion

I understand that the Government of the day is satisfied with the progress of housing in the circumstances in which we live. With respect, I submit that it falls seriously short of requirements, and that the large number of unhappy people of all ages who are condemned to live in distressing conditions are entitled to a more hopeful future than that presented to them today. The shortage of houses combined with the

14

lack of a fair and complete scheme of selection of tenants make housing work in this Borough most frustrating and depressing. In the interests of both applicants, and of the Housing Committee, the employment of additional staff to operate the points system and to administer Housing generally is a matter of utmost urgency and importance.

10.	Sun	nmary of Action taken under Housing Acts:	
	(a)	Inspection of Dwelling houses during the year for housing defects	55
	(b)	Number of Dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	21
	(c)	Number of housing defects found	137
	(d)	Number of defects remedied without services of formal notices	92
	(e)	Action under Statutory Powers during the year:— (i) Proceedings under Section 9 of the Housing Act, 1936 (ii) Proceedings under Public Health Act (iii) Proceedings under Sections 11 and 13 of the	Nil Nil
		Housing Act, 1936 (iv) Proceedings under Section 12 of the Housing	21
	(f)	Act, 1936	Nil
		(i) Total number erected by Local Authority during year (ii) Total number erected by Private Enterprise	67

during year

#### SECTION VII

#### REPORT OF THE PORT MEDICAL OFFICER

#### 1. Area

There have been no changes in the area of the Port, in the facilities provided or in the nature of the cargoes dealt with, which consisted mainly of petrol and coal from Home Ports and fertilisers and timber from the Continent.

#### 2. Arrivals

(a) The number of ships arriving at the Port during the year was as follows:—

	Sailing Vessels	Motor Vessels and Tankers	Total	Registered Tonnage
Faversham Creek	 87 (121)	329 (387)	416 (508)	26,243
Milton Creek	742 (659)	136 (56)	878 (715)	84,065

(b) None of the arrivals was a "foreign going" ship within the

meaning of the Port Health Regulations.

(c) The large number of vessels arriving at Milton Creek include the considerable volume of Barge or lighter traffic bringing in coal clinker, clay and ashes. Some vessels (barges) are also brought in for repairs.

#### 3. Disease

No disease was reported.

# 4. Inspections

Five routine inspections were carried out in Faversham Port and the same number in the Western Section at Milton.

#### 5. Recommendations

Nil.

#### APPENDIX A

# Readings Recorded at the Borough Sewage Works (By courtesy of Mr. Colin Walton)

Month	Maximum° Minimum°		Rainfall in ins.	
January February March April May June July August September October November December Total	54° (55°)* 58° (46°) 63° (57°) 81° (74°) 73° (76°) 86° (86°) 92° (88°) 86° (84°) 91° (78°) 71° (72°) 56° (61°) 55° (58°)	27° (24°) 18° (35°) 25° (38°) 30° (32°) 31° (33°) 40° (44°) 43° (45°) 44° (42°) 48° (35°) 27° (26°) 25° (24°) 25° (18°)	1.50 (2.80) .93 (1.36) .81 ( .77) 1.30 (1.80) 1.48 (1.39) .55 (2.55) .65 (1.16) .87 (2.27) 1.50 (2.36) 6.32 (1.27) 3.40 (1.61) 1.10 (2.43)	

<sup>\*</sup>Figures in brackets refer to the preceding year.

# APPENDIX B

# Nuisances and Housing Defects Dealt With

Choked drains		 7
Defective drains		 3
Defective W.C. Pans and cisterns		 10
Insufficient drainage		 1
Overflowing cesspools		 2
Leaking and defective roofs		 . 16
Dampness		 6
Defective walls		 8
Defective floors	•••	 6
Defective ceilings		 7
Defective stoves and coppers		 8
Defective doors and windows		 7
Defective sinks	•••	 3
Defective chimneys		 3
Defective eaves, gutters and down	pipes	 5
	Total	 92

